Case 1:14-bk-13698 Doc 1 Filed 08/22/14 Entered 08/22/14 13:33:19 Desc Main

B1(Official Form 1) (4/13) Page 1 of 56 Document United States Bankruptcy Court Voluntary Petition Eastern District of Tennessee Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Walker, Wallace Ray Walker, Glenda Kaye All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): XXX-XX-0229 (if more than one state all): XXX-XX-2559 Street Address of Debtor (No. & Street, City, and State): Street Address of Joint Debtor (No. & Street, City, and State): 2475 Twin Oaks Drive SE 2475 Twin Oaks Drive SE Cleveland, TN Cleveland, TN ZIP CODE **37323** ZIP CODE 37323 County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: **Bradley** Bradlev Mailing Address of Debtor (if different from street Address): Mailing Address of Joint Debtor (if different from street address): ZIPCODE ZIP CODE Location of Principal Assets of Business Debtor (if different from street address above): ZIP CODE Type of Debtor Nature of Business Chapter of Bankruptcy Code Under Which (Form of Organization) (Check one box.) the Petition is Filed (Check one box.) (Check one box) Health Care Business Chapter 7 Chapter 15 Petition for Individual (includes Joint Debtors) Single Asset Real Estate as defined in Recognition of a Foreign Chapter 9 See Exhibit D on page 2 of this form. 11 U.S.C. § 101 (51B) Main Proceeding Corporation (includes LLC and LLP) Chapter 11 Railroad Chapter 15 Petition for Stockbroker Chapter 12 Partnership Recognition of a Foreign Commodity Broker Other (If debtor is not one of the above entities, П X Chapter 13 Nonmain Proceeding Clearing Bank check this box and state type of entity below.) Other Nature of Debts **Chapter 15 Debtors** Tax-Exempt Entity (Check box, if applicable.) (Check one box.) Country of debtor's center of main interests: Debts are N Debts are primarily consumer Debtor is a tax-exempt organization debts, defined in 11 U.S.C. primarily under Title 26 of the United States §101(8) as "incurred by an business debts. Each country in which a foreign proceeding by, regarding, or Code (the Internal Revenue Code). individual primarily for a against debtor is pending: personal, family, or household purpose." Filing Fee (Check one box.) **Chapter 11 Debtors** Check one box: Debtor is a small business as defined in 11 U.S.C. § 101(51D). Full Filing Fee attached. Debtor is not a small business as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (Applicable to individuals only). Must attach Check if: signed application for the court's consideration certifying that the debtor is Debtor's aggregate noncontingent liquidated debts (excluding debts owed to unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must on 4/01/16 and every three years thereafter). attach signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b) Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY  $\mathbf{X}$ Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors **Estimated Number of Creditors** X П П П 1,000-1-49 50-99 100-199 200-999 5,001-10,001-25,001-50,001-OVER 5 000 10,000 25.000 50,000 100,000 100,000 **Estimated Assets** \$100,000,001 to \$500 \$500,000,001 More than \$50,001 to \$1,000,001 \$10,000,001 \$50,000,001 \$0 to \$50,000 \$100,001 to \$500,001 to \$1 billion \$1 billion \$100,000 \$500,000 to \$1 to \$10 to \$50 to \$100 million million million million millior **Estimated Liabilities**  $\mathbf{X}$ Ш Ш \$10,000,001 \$100,000,001 \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$50,000,001 \$500,000,001 More than \$0 to

\$50,000

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to \$100 million to \$500

million

to \$1 billion

\$1 billion

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(	Document	Tage Z of 30	TORM DI, 1 age 2				
Voluntary Petition		Name of Debtor(s): Walker, Wallace Ra	y				
(This page must be co	mpleted and filed in every case.)	Walker, Glenda Kay	ve .				
	All Prior Bankruptcy Cases Filed Within Last 8 Years (1	f more than two, attach additional sheet.)					
Location Where Filed:		Case Number:	Date Filed:				
Location Where Filed:		Case Number:	Date Filed:				
Pending	Bankruptcy Case Filed by any Spouse, Partner or Affiliate of thi	s Debtor (If more than one, attach additional she	et)				
Name of Debtor		Case Number:	Date Filed:				
District		Relationship	Judge				
10Q) with the Securities	Exhibit A  tor is required to file periodic reports (e.g., forms 10K and s and Exchange Commission pursuant to Section 13 or 15(d) age Act of 1934 and is requesting relief under chapter 11.)	Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).					
Exhibit A is att	ached and made a part of this petition.	X /s/ Richard L. Banks, #000617	August 22, 2014				
		Signature of Attorney for Debtor(s)	Date				
	Exhibit (						
	r have possession of any property that poses or is alleged to pose a threat C is attached and made a part of this petition.		th or safety?				
	Evhibit l	n					
Exhibit D con	Exhibit D  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.						
	9	ng the Debtor - Venue					
X	(Check any applicabl Debtor has been domiciled or has had a residence, principal place of business preceding the date of this petition or for a longer part of such 180 days than i	s, or principal assets in this District for 180 days immedi	ately				
	There is a bankruptcy case concerning debtor's affiliate, general partner, or p	artnership pending in this District.					
	Debtor is a debtor in foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.						
	Certification by a Debtor Who I	Resides as a Tenant of Residential Proper	ty				
	(Check al	l applicable boxes.)					
	Landlord has a judgment for possession of debtor's residence. (If box checked	ed, complete the following.)					
	(Name of landlord that obt	ained judgement)					
	(Address of landlord)						
	Debtor claims that under applicable nonbankruptcy law, there are circumstan permitted to cure the entire monetary default that gave rise to the judgment for possession was entered, and						
	Debtor has included in this petition the deposit with the court of any rent that period after the filing of the petition.	would become due during the 30-day					
	Debtor certifies that he/she has served the Landlord with this certification. (	11 U.S.C. §362(1)).					

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B1(Offic	cial Form 1) (04/13)	Page 3 01 50 FORM B1, Page 3
Volunta	ry Petition	Name of Debtor(s): Walker, Wallace Ray
(This pa	ge must be completed and filed in every case)	Walker, Glenda Kaye
	Si	gnatures
	Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
and corre [If petition chosen to or 13 of the chapter, a	oner is an individual whose debts are primarilly consumer debts and has offile under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 itle 11, United States Code, understand the relief available under each such and choose to proceed under chapter 7.	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only <b>one</b> box.)  I request relief in accordance with chapter 15 of title 11, United States Code.
	orney represents me and no bankruptcy petition preparer signs the petition] I ained and read the notice required by 11 U.S.C. § 342(b).	Certified copies of the documents required by 11 U.S.C.§ 1515 are attached.  Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the
_	relief in accordance with the chapter of title 11, United States Code, in this petition.	chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X	/s/ Wallace Ray Walker	X
**	Signature of Debtor	(Signature of Foreign Representative)
X	/s/ Glenda Kaye Walker	
	Signature of Joint Debtor	(Printed Name of Foreign Representative)
	Telephone Number (If not represented by attorney)	
	August 22, 2014  Date	(Date)
	Signature of Attorney *	Cimaton of Non Attorney Building Burnson
X	/s/ Richard L. Banks, #000617	Signature of Non-Attorney Petition Preparer
Λ	Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as
	Richard L. Banks, #000617	defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have
		provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines
	Printed Name of Attorney for Debtor(s)	have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for
	Richard Banks & Associates, P.C.	services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting
	Firm Name	any fee from the debtor, as required in that section. Official Form 19 is attached.
	P.O. Box 1515 Cleveland, TN 37364-1515 Address	- N. A. A. W. Chille
	Addiess	Not Applicable
	(423)479-4188	Printed Name and title, if any, of Bankruptcy Petition Preparer
	Telephone Number	Social Security Number (If the bankruptcy petition preparer is not an
	August 22, 2014	individual, state the Social Security number of the officer, principal,
	Date	responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
	e in which § 707(b)(4)(D) applies, this signature also constitutes a	Address
	on that the attorney has no knowledge after an inquiry that the on in the schedules is incorrect.	Addless
	Signature of Debtor (Corporation/Partnership)	X Not Applicable
I declare	under penalty of perjury that the information provided in this petition is true	1 - We - Apparente
and corredebtor.	ect, and that I have been authorized to file this petition on behalf of the	Date:
	or requests the relief in accordance with the chapter of title 11, United ode, specified in this petition.	Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.
	Signature of Authorized Individual	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
	Printed Name of Authorized Individual	an maiyidda.
	Title of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
	Date	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C§110; 18 U.S.C.§156.

B 1D(Official Form 1, Exhibit D) (12/09)

## UNITED STATES BANKRUPTCY COURT Eastern District of Tennessee

In re	Wallace Ray Walker	Case No.	
	Debtor(s)		(if known)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligile to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ☑ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

B 1D(Official Form 1, Exhibit D) (	12/08) - Cont.		
was unable to obtain the se following exigent circumst	rvices during the five days fro	rvices from an approved agency but m the time I made my request, and the er of the credit counseling requirement ant circumstances here.]	
counseling briefing within promptly file a certificate copy of any debt manage requirements may result can be granted only for c be dismissed if the court	n the first 30 days after you for e from the agency that provide ment plan developed through in dismissal of your case. An ause and is limited to a maxi	t, you must still obtain the credit file your bankruptcy petition and led the counseling, together with a nather agency. Failure to fulfill these my extension of the 30-day deadline mum of 15 days. Your case may also sons for filing your bankruptcy case	
applicable statement.] [M  ☐ Incapa illness or mental der decisions with resper ☐ Disabret extent of being unal briefing in person, briefing in person briefin	fust be accompanied by a motivacity. (Defined in 11 U.S.C. § ficiency so as to be incapable of ect to financial responsibilities. illity. (Defined in 11 U.S.C. § tole, after reasonable effort, to poy telephone, or through the Intermittent of the military duty in a military contract.)	109(h)(4) as physically impaired to the participate in a credit counseling ternet.); mbat zone.  nistrator has determined that the credit	
I certify under p correct.	enalty of perjury that the inf	ormation provided above is true and	
	Signature of Debtor:	/s/ Wallace Ray Walker	
	Date: August 22, 2014		

B 1D(Official Form 1, Exhibit D) (12/09)

## UNITED STATES BANKRUPTCY COURT Eastern District of Tennessee

In re	Glenda Kaye Walker	Case No.	
	Debtor(s)		(if known)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligile to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ☑ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

B 1D(Official Form 1, Exhibit D) (	12/08) - Cont.		
was unable to obtain the se following exigent circumst	rvices during the five days from	the time I made my request, and the of the credit counseling requirement circumstances here.]	
counseling briefing within promptly file a certificate copy of any debt manage requirements may result can be granted only for c be dismissed if the court	n the first 30 days after you file e from the agency that provided ment plan developed through t in dismissal of your case. Any ause and is limited to a maxim	you must still obtain the credit e your bankruptcy petition and d the counseling, together with a he agency. Failure to fulfill these extension of the 30-day deadline um of 15 days. Your case may also ns for filing your bankruptcy case	
applicable statement.] [M  ☐ Incapa illness or mental der decisions with resper ☐ Disabret extent of being unal briefing in person, briefing in person briefin	fust be accompanied by a motion acity. (Defined in 11 U.S.C. § 10 ficiency so as to be incapable of act to financial responsibilities.); illity. (Defined in 11 U.S.C. § 10 pole, after reasonable effort, to pare by telephone, or through the Interest military duty in a military comb	9(h)(4) as physically impaired to the rticipate in a credit counseling rnet.); bat zone.	
I certify under p correct.	enalty of perjury that the infor	rmation provided above is true and	
	Signature of Joint Debtor:	/s/ Glenda Kaye Walker	
	Date: August 22, 2014		

#### UNITED STATES BANKRUPTCY COURT

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that banrkuptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankrptcy Code Available to Individual Consumer Debtors

#### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States Trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny

Form B 201A, Notice to Consumer Debtor(s)

Page 2

your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy">http://www.uscourts.gov/bkforms/bankruptcy</a> forms.html#procedure.

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B 201B (Form 201B) (12/09)

#### UNITED STATES BANKRUPTCY COURT

Eastern District of Tennessee

In re: Wallace Ray Walker	Case No.	
Debtor	Chapter 13	
UNDER § 342(b)C	OTICE TO CONSUMER DEBTOR(S OF THE BANKRUPTCY CODE torney] Bankruptcy Petition Preparer	)
I, the [non-attorney] bankruptcy petition preparer signing attached notice, as required by § 342(b) of the Bankruptcy Code.	the debtor's petition, hereby certify that I delivered	ed to the debtor the
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:  X	number of the officer, prin	f the bankruptcy petition nal, state the Social Security ncipal, responsible person, or petition preparer.) (Required
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.		
Certi	ification of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and Code.	read the attached notice, as required by §342(b)	of the Bankruptcy
Wallace Ray Walker	X /s/ Wallace Ray Walker	08/22/2014
Glenda Kaye Walker	Signature of Debtor	Date
Printed Name(s) of Debtor(s)	<b>X</b> /s/ Glenda Kaye Walker	08/22/2014
Case No. (if known)	Signature of Joint Debtor	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under §342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. §342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certivication by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

## Case 1:14-bk-13698 Doc 1 Filed 08/22/14 Entered 08/22/14 13:33:19 Desc Main Document Page 11 of 56

B6A (0	Official Form 6 A) (12/07)	<b>G</b>			
In re	Wallace Ray Walker	,	Case No.		
	Glenda Kave Walker	Debtor(s)		(if known)	_

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co- tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
House & Lot 2475 Twin Oaks Drive SE Cleveland, TN		J	\$78,000.00	\$87,752.12

Γotal > <b>\$78,000.00</b>
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B6B (0	Offic@a66 48144/brk-13698	Doc 1	Filed 08/22 Document			/22/14 1	3:33:19	Desc Main
In re	Wallace Ray Walker			9	_,	Case No.		
	Glenda Kaye Walker		De	btor(s)	_	_	(if known)	

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	X			\$0.00
2. Checking, savings or other financial accounts, cds, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses or cooperatives.		Checking/Savings Account	J	\$600.00
		Savings Account	J	\$157.00
3. Security deposits with public utilities, telephone companies, landlords and others.	X			\$0.00
4. Household goods and furnishings, including audio, video and computer equipment.		Household Goods	J	\$1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc and other collections or collectibles.	X			\$0.00
6. Wearing apparel		Clothing & Other Personal Effects	J	\$300.00
7. Furs and jewelry.	X			\$0.00
8. Firearms and sports, photographic and other hobby equipment.	X			\$0.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			\$0.00
10. Annuities. Itemize and name each issuer.	X			\$0.00

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In re_	Wallace Ray Walker	,	Case No.	
	Glenda Kaye Walker	Debtor(s)		(if known)

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	_	(Continuation Sheet)	1	1
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			\$0.00
12. Interests in IRA, Erisa, Keogh or other pension or profit sharing plans. Itemize.	X			\$0.00
13. Stock & interests in incorporated and unincorporated businesses. Itemize.	X			\$0.00
14. Interests in partnerships or joint ventures. Itemize.	X			\$0.00
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			\$0.00
16. Accounts receivable.	X			\$0.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			\$0.00
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			\$0.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			\$0.00
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			\$0.00
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor and rights to setoff claims. Give estimated value of each.	X			\$0.00
22. Patents, copyrights and other intellectual property. Give particulars.	X			\$0.00
23. Licenses, franchises and other general intangibles. Give particulars.	X			\$0.00

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In re Wallace Ray V	Walker				•	Case No.		

Glenda Kaye Walker

SCHEDULE B - PERSONAL PROPERTY

Debtor(s)

### (Continuation Sheet)

(if known)

		(Continuation Sneet)		
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			\$0.00
25. Automobiles, trucks, trailers and other vehicles and accessories.		2012 Volkswagen Tiguan	J	\$22,800.00
		2002 Jeep Wrangler	J	\$7,225.00
26. Boats, motors, and accessories.		2007 Yamaha Grizzly 450	J	\$2,500.00
27. Aircraft and accessories.	X			\$0.00
28. Office equipment, furnishings and supplies.	X			\$0.00
29. Machinery, fixtures, equipment and supplies used in business.	X			\$0.00
30. Inventory.	X			\$0.00
31. Animals.	X			\$0.00
32. Crops - growing or harvested. Give particulars.	X			\$0.00
33. Farming equipment and implements.	Х			\$0.00
34. Farm supplies, chemicals, and feed.	X			\$0.00
35. Other personal property of any kind not already listed. Itemize.	X			\$0.00
		2 continuation sheets attached Total	>	35,082.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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In re	Wallace Ray Walker			Case No.	
	Glenda Kaye Walker	Debtor(s)	_		(if known)

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debto	r claims the exemptions to which debtor is entitled under:	Check if debtor claims a homestead exemption that exceeds
(Checl	k one box)	\$155,675.*
X	11 U.S.C. § 522(b)(2):	
	11 U.S.C. § 522(b)(3):	

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
2007 Yamaha Grizzly 450 Cleveland, TN	TCA § 26-2-103	2,500.00	2,500.00
Checking/Savings Account BB&T	TCA § 26-2-103	600.00	600.00
Clothing & Other Personal Effects	TCA § 26-2-104	300.00	300.00
House & Lot 2475 Twin Oaks Drive SE Cleveland, TN	TCA § 26-2-301(a)	7,500.00	78,000.00
Household Goods	TCA § 26-2-103	1,500.00	1,500.00
Savings Account BMH Credit Union	TCA § 26-2-103	157.00	157.00

Total: \$12,557.00

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 7017		J	2002 Jeep Wrangler		Ì	j	\$9,039.00	\$1,814.00
Bradley Memorial Credit Union P.O. Box 3060 Cleveland, TN 373203060			Date Incurred:					
			VALUE \$7,225.00	1				
ACCOUNT NO. 6379		J	2012 Volkswagen Tiguan				\$22,974.00	\$174.00
Volkswagen Credit PO Box 5215 Carol Stream, IL 60132			Date Incurred:					
			VALUE \$22,800.00	11				
ACCOUNT NO. 4486		J	House & Lot		Ì	Ì	\$87,752.12	\$9,752.12
Wells Fargo Financial P.O. Box 10475 Des Monies, IA 50306			First Mortgage Date Incurred:					
			VALUE \$78,000.00	1				
			H. I. C. LOI:	7	Γota	1>	\$119,765,12	11,740,12

Sheet no. of continuation sheets attached to Schedule of Creditors Holding Secured Claims

(Report total also on Summary of Schedules)

(Use only on last page)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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B6E (Official Form 6E) (04/13)

In re:	Wallace Ray Walker		_,	Case No.		
•	Glenda Kave Walker	Debtor(s)			(if known)	

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed.R.Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

X Check this box if debtor has no creditors hold	ding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Che	eck the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic Support Obligations	
**	or recoverable by a spouse, former spouse, or child of the detor, or the parent, legal guardian, or tal unit to whom such a domestic support claim has been assigned to the extent provided in
Extensions of credit in an involuntary case	
Claims arising in the ordinary course of the del appointment of a trustee or the order for relief. 11 U	btor's business or financial affairs after the commencement of the case but before the earlier of the U.S.C. § 507(a)(3).
Wages, salaries, and commissions	
	acation, severance, and sick leave pay owing to employees and commissions owing to qualifying r person earned within 180 days immediately preceding the filing of the original petition, or the e extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans	
Money owed to employee benefit plans for ser cessation of business, whichever occurred first, to the	rvices rendered within 180 days immediately preceding the filing of the original petition, or the ne extent provided in 11 U.S.C. § 507(a)(5).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 1:14-bk-13698 Doc 1 Filed 08/22/14 Entered 08/22/14 13:33:19 Desc Main Document Page 18 of 56 B6E (Official Form 6E) (04/13) - Cont. In re: Wallace Ray Walker Case No. Glenda Kaye Walker Debtor(s) (if known) Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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n re	Wallace Ray Walker		_ ,	Case No.	
	Glenda Kaye Walker	Debtor(s)	<del>_</del>		(if known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total"on the last sheet of the completed schedule. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 4410  Anesthesia Consultants Exchange P.O. Box 371863 Pittsburgh, PA 152507863	<u> </u>	J	Medical				\$431.00
ACCOUNT NO. 1819  Belk P.O. Box 530940 Atlanta, GA 303530940		J	Credit Card Charges				\$946.78
ACCOUNT NO. 3562  Blue Ridge Pulmonary 110 Dunhill Place Cleveland, TN 37311		J	Medical				\$265.34
ACCOUNT NO. 7968  Capital One PO Box 71083 Charlotte, NC 282721083		J	Credit Card Charges				\$2,831.66

Subotal (Total this Page)	\$4,474.78
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Glenda Kaye Walker

In re

/ \ /	•
Wallace Ray Walker	,

Case No.

(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Debtor(s)

(Continuation Sheet) HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED DISPUTED CONTINGENT CODEBTOR AMOUNT OF DATE CLAIM WAS CREDITOR'S NAME, CLAIM INCURRED AND MAILING ADDRESS CONSIDERATION FOR INCLUDING ZIP CODE, CLAIM. AND ACCOUNT NUMBER IF CLAIM IS SUBJECT TO (See instructions above.) SETOFF, SO STATE. Credit Card Charges ACCOUNT NO. 2500 \$1,536.70 Capital One Retail Services Dept. 7680 Carol Stream, IL Credit Card Charges ACCOUNT NO. 1240 \$1,824.45 Cardmember Services P.O. Box 94014 Palatine, IL 600944014 3092 Credit Card Charges \$975.05 ACCOUNT NO. Care Credit P.O. Box 960061 Orlando, FL 328960061 ACCOUNT NO. 6077 Credit Card Charges \$3,370.85 Chase P.O. Box 94014 Palatine, IL 60094 Medical ACCOUNT NO. N/A \$2,415.60 Cleveland Medical Clinic P.O. Box 848418 Boston, MA 022848418 Credit Card Charges ACCOUNT NO. 3978 \$1,413.51 Dell Preferred Account PO Box 6403 Carol Stream, IL 601976403

Sheet no.	1	of	4	sheets attached to Schedule of
Craditors Ho	ldina I	Incor	nirad	Nonpriority Claims

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In re

Wallace Ray Walker		,
Glenda Kaye Walker	Debtor(s)	

Case No.

(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)								
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO. 7412  Discover P.O. Box 6103		J	Credit Card Charges				\$10,183.34	
Carol Stream, IL 301976103								
ACCOUNT NO. 9268		J	Medical				\$93.22	
East TN Neurology P.O. Box 3861 Cleveland, TN 37320								
ACCOUNT NO. N/A		J	Credit Card Charges				\$1,399.27	
JC Penney P.O. Box 960090 Orlando, FL 32890								
ACCOUNT NO. 3510		J	Credit Card Charges				\$343.88	
Kohls P.O. Box 2983 Milwaukee, WI 532012983								
ACCOUNT NO. 1989		J	Credit Card Charges				\$3,612.63	
Lowes PO Box 530914 Atlanta, GA 303530914								
ACCOUNT NO. 2909		J	Medical				\$238.28	
Memorial Health Care System P.O. Box 644492 Pittsburgh, PA 152644492								

 $\underline{2}$  of  $\underline{4}$  sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subotal (Total this Page)

\$15,870.62

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Glenda Kaye Walker

In re

Wallace Ray Walker		,
Glenda Kave Walker	Debtor(s)	

Case No.

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	<u> </u>	1 ((	Continuation Sheet)	<del></del>			
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 8140		J	Collection-Memorial Hospital	İ			\$336.6
MSCB P.O. Box 1567 Paris, TN 382421567							
ACCOUNT NO. N/A		J	Collection-Cleveland Medical Clinic				\$220.0
PASI PO Box 188 Brentwood, TN 370240188							
ACCOUNT NO. N/A		J	Collection-Chattanooga Heart Institute				\$550.0
RMB 409 Bearden Park Circle Knoxville, TN 37919							
ACCOUNT NO. 1853		J	Medical				\$100.0
SkyRidge Medical Center PO Box 198029 Atlanta, GA 303848029							
ACCOUNT NO. N/A		J	Medical				\$1.0
SkyRidge Medical Center PO Box 198029 Atlanta, GA 303848029							
ACCOUNT NO. 1369		J	Medical				\$142.5
Southeastern Physician Service P.O. Box 630707 Cincinnati, OH 452630707							

 $\underline{3}$  of  $\underline{4}$  sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

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Glenda Kaye Walker

In re

Wallace Ray Walker	,	
Glenda Kave Walker	Debtor(s)	

Case	Nο

(if known)

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	((	Continuation Sheet)				
CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
	J	Medical				\$55.87
	J	Credit Card Charges				\$773.95
	J	Medical				\$158.82
	J	Medical				\$87.92
	J	Medical				\$397.92
	CODEBTOR	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.    J   Medical     J   Medical	BATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  J Medical  J Medical  J Medical	BOLLEGON PARTICIPATION OF CHAIM IN CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  J Medical  J Medical  J Medical  J Medical	BATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  J Medical  J Medical  J Medical  J Medical  J Medical

Sheet n  $\underline{4}$  of  $\underline{4}$  sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Total > (Use only on last page of the completed Schedule F) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

\$34,706.27

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In re	Wallace Ray Walker	,	Case No.
	Glenda Kaye Walker	Debtor(s)	(if known)

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired elases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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B6H (Official Form 6H) (12/07)

In re	Wallace Ray Walker		_ ,	Case No.		
	Glenda Kaye Walker	Debtor(s)	_	_	(if known)	

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

X	Check this	box if debtor	has no codebto	ors

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

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Fill in this in	formation to identify you	r case:							
Debtor 1	Wallace	Ray Wa	lker						
Debior	First Name	Middle Name Last N	lame		_				
Debtor 2		Kaye Wa	lker		_				
(Spouse, if filing)	First Name	Middle Name Last N	lame						
United States	Bankruptcy Court for the:	Eastern District of	Tennessee		_				
Case Numbe	r				_				
(If known)						Check if this	s is:		
						An ame	nded filing		
						=	ū		- 4:4:
Official For	one D.C.						ement showing 13 income as		
Official For	III B 01					onaptor	TO IIICOIIIC US	or the re	mowning date.
Schedule	e I: Your Incon	ne				MM / DI	D / YYYY		
spouse. If you a	are separated and your sp	married and not filing jointly ouse is not filing with you, d he top of any additional pag	o not include infe	ormatic	n about y	our spouse. If	more space is ne	eded,	
Fill in you	r employment on.		Debtor 1				Debtor 2 or	non-filing	spouse
If you have	e more than one job,								
•	eparate page with	Employment status	Employed	b			X Employ	yed	
information employers	n about additional		X Not empl	oyed			☐ Not em	nployed	
Include pa self-emplo	rt-time, seasonal, or yed work.	Occupation					RN		
Occupation	n may include student								
or homem	aker, if it applies.						G1 :1 14		
		Employer's name					Skyridge Med	lical Cent	er
		Employer's address					Attn: Payroll	Dept.	
							2305 Chambl	iss Ave.	
							Cleveland, Tl	N 37311	
			City	State	ZIP C	ode	City	State	ZIP Code
	ш	ow long employed there?					23 years		
	110	ow long employed there:					25 years		
	Give Details About Mor								
spouse unless If you or your	s you are separated. non-filing spouse have mor	e you file this form. If you have than one employer, combin- separate sheet to this form.				•	·	on-filing	
•	•				For D	ebtor 1	For Debtor 2 or		
A T	• -						non-filing spous	e	
	y gross wages, salary, and co If not paid monthly, calculate	mmissions (before all payroll what the monthly wage would be	e.	2.		^ ^ ^		C 02	
	•				\$	0.00	\$ 4,610		
	l list monthly overtime pay.	_			+ <u>\$</u>	0.00	+ \$ 439	9.81	
4. Calculate gr	ross income. Add line 2 + line	3.		4.	\$	0.00	\$ 5,055	5.84	

Official Form B 6I Schedule I: Your Income page 1

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Walker Debtor 1 Wallace Rav Case Number (If known) First Name Middle Name Last Name For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4. 0.00 5,055.84 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 0.00 1,130.74 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 0.00 5d. Required repayments of retirement fund loans 0.00 5d. 0.00 5e. Insurance 5e. 212.40 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 0.00 0.00 5g. 5h. Other deductions. Specify: Life/STD 5h. 0.00 51.02 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. 0.00 \$1,394.16 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 3,661.68 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 8a. 0.00 0.00 monthly net income. 8b. Interest and dividends 8h 0.00 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 0.00 settlement, and property settlement. 8d. Unemployment compensation 8d. 0.00 0.00 \$ 8e. Social security 8e. \$ 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 0.00 \$ 0.00 \$ 8g. Pension or retirement income 8g. 0.00 8h. Other monthly income. Specify: 8h. + \$ 0.00 0.00 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. 0.00 0.00 10. Calculate monthly income. Add line 7 +line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 1 10. 3,661.68 \$3,661.68 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 3,661.68 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Х Yes. Explain: Debtor has applied for disability

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E:::		-				
Fill in this in	formation to identi	ry your case:				
Debtor 1	Wallace	Ray  Middle Name	Walker  Last Name	Check if this is:		
Debtor 2	First Name Glenda	Kaye	Walker		al Ellina	
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended	_	
United States	Bankruptcy Court fo	or the: Eas	stern District of Tennessee		ent showing post-pet of the following date:	
Case Numbe	r			miconic do c	or the following date.	
(If known)				MM / DD / Y	YYYY	
				A separate t	filing for Debtor 2 be	cause Debtor 2
Official Fo	orm B 6J			maintains a	separate household	I
Schedu	le J: Your I	Expenses				12/13
information. If (if known). An	-	led, attach anoth 1.		oth are equally responsible for sup of any additional pages, write your		per
1. Is this a joi						
	Go to line 2.  Does Debtor 2 live	in a sonarato ho	usahold?			
X 103.	X No.	iii a separate no	usonoid:			
	<b>—</b> 140.	! must file a sepa	rate Schedule J.			
	<u> </u>					
2. Do you hav	e dependents?	M	No	Depedent's relationship to	Dependent's	Does dependent live
Do not list l Debtor 2.	Debtor 1 and		Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age	with you?
Debioi 2.			·			No
Do not stat names.	e the dependents'					Yes
names.						No
						Yes No
						Yes
						No
						Yes
						No You
					<u> </u>	Yes
_	openses include of people other than	х	No			
-	nd your dependents		Yes			
Part 2:	Estimate Your On	going Monthly	Expenses			
	of a date after the ba			form as a supplement in a Chapte e <i>J</i> , check the box at the top of the		
Include expen	ses paid for with no	n-cash governm	ent assistance if you know the va	lue		
of such assist	ance and have inclu	ided it on Sched	ule I: Your Income (Official Form	B 6I.)	Your exp	penses
	I or home ownership or the ground or lot.	expenses for y	our residence. Include first mortga	ge payments and	4. \$	0.00
If not incl	uded in line 4:				40 °C	0.00
4a. Real e	estate taxes				4a. \$	
4b. Prope	erty, homeowner's, or	renter's insuranc	ce		4b. \$	0.00
4c. Home	maintenance, repair	r, and upkeep exp	penses		4c. \$	115.00
4d Home	owner's association	or condominium	dues		4d. \$	0.00

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Debtor 1 Wallace Ray Walker Case Number (If known)
First Name Middle Name Last Name

			You	r expenses
5.	Additional mortgage payments for your residence, such as home equity	_	_	·
6.		5.	\$	0.00
О.	Utilities: 6a. Electricity, heat, natural gas	6a.	\$	230.00
	•	6b.	\$	0.00
	6b. Water, sewer, garbage collection	6c.	\$	345.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6d.	\$	0.00
	6d. Other. Specify:	ou.	Ψ <u> </u>	0.00
	Food and housekeeping supplies	7.	\$	500.00
	Childcare and children's education costs	8.	\$	0.00
).	Clothing, laundry, and dry cleaning	9.	\$	75.00
0.	Personal care products and services	10.	\$	60.00
1.	Medical and dental expenses	11.	\$	215.00
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.	12.	\$	250.00
2	Do not include car payments.	13.	\$	50.00
3. 4.	Entertainment, clubs, recreation, newspapers, magazines, and books		·——	
•••	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include car payments insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life Insurance	15a.	\$	0.00
	15b. Health Insurance	15b.	\$	0.00
	15c. Vehicle Insurance	15c.		99.00
	15d. Other Insurance. Specify:	15d.	\$	0.00
6.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specific	16.	\$	0.00
_	· · ·			
1.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.		0.00
	17b. Car payments for Vehicle 2	17b.		0.00
	17c. Other. Specify:	17c.	· <del></del>	0.00
	17d. Other. Specify:	17d.	\$	0.00
8.	Your payments of alimony, maintenance, and support that you did not report as deducted			
	from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	· ——	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	· —	0.00

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Deb	tor 1	Wallace	)	Ray	Walker	Case Number	(If known)			
		First Name		Middle Name	Last Name		-			
21.	Othe	r. Specify	/:				2	1. +	·\$	0.00
22.			expenses. Adour monthly exp	d lines 4 through penses.	n 21.		2	2.	\$	1,939.00
23.		-	r monthly net i							3,661.68
	23a.	Copy line	e 12 (your comi	bined monthly in	come) from Schedule I.		2	3а.	\$	3,001.00
	23b.	Сору уо	ur monthly expe	enses from line 2	22 above.		2	3b	-\$	1,939.00
	23c.		-	xpenses from you	our monthly income.		2	3c.	\$	1,722.68
23.	Do ve	ou expec	t an increase o	r decrease in vo	our expenses within the	vear after vou file this	form?			
	For e	xample, o	do you expect t	o finish paying fo	or your car loan within the	e year or do you expect	your			
	ä	No Yes	Explain here:							

B6 Summary (Official Form 6 - Summary) (12/13)

### **United States Bankruptcy Court**

#### **Eastern District of Tennessee**

In re	Wallace Ray Walker	_,	Case No.
	Glenda Kaye Walker	Debtor(s)	
			Chapter

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$78,000.00		
B - Personal Property	YES	3	\$35,082.00		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$119,765.12	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	5		\$34,706.27	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$3,661.68
J - Current Expenditures of Individual Debtor(s)	YES	3			\$1,939.00
	TOTAL	20	\$113,082.00	\$154,471.39	

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B 6 Summary (Official Form 6 - Summary) (12/13)

### **United States Bankruptcy Court**

		Eastern District of Ten	nessee	
In re	Wallace Ray Walker		Case No.	
	Glenda Kaye Walker			
		Debtor(s)	Chapter 13	

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as efined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	\$0.00
Student Loan Obligations (from Schedule F)	\$	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E.	\$	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	\$0.00
TOTAL	\$	\$0.00

#### State the following:

Average Income (from Schedule I, Line 12)	\$ 3,661.68
Average Expenses (from Schedule J, Line 22)	\$ 1,939.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$ 4,963.04

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$	11,740.12
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$ 0.0	0	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$	0.00
4. Total from Schedule F		\$	34,706.27
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$	46,446.39

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B6 Declaration (Official Form 6 - Declaration) (12/07) Document Page 33 of 56

In re: Wallace Ray Walker Case No. Glenda Kaye Walker (if known)

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 22 sheets, and that they are true and correct to the best of my knowledge, information and belief. Signature: /s/ Wallace Ray Walker August 22, 2014 Date Debtor Date August 22, 2014 Signature: /s/ Glenda Kaye Walker (Joint Debtor, if any) (If joint case, both spouses must sign.) DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Not Applicable Printed or Typed Name of Bankruptcy Petition Preparer (Required by 11 U.S.C. § 110) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person ,or partner who signs this document. Address Not Applicable Signature of Bankruptcy Petition Preparer Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C§110; 18 U.S.C.§156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. (Total shown on summary page plus 1.) Signature: [Print or type name of individual signing on behalf of debtor.]

Penalty for making a false statement or concealing property:

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

#### UNITED STATES BANKRUPTCY COURT

Eastern District of Tennessee

In re:	Wallace Ray Walker	Case No.	
and:	Glenda Kaye Walker	•	If known

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not ajoint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$42,800.00 (Estimated) 2014 YTD; Joint Debtor

\$88,831.00 2013 \$93,028.00 2012

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B7 (Official Form 7) (04/13)

_		_			
2.	Income other that	ı from emn	lovment or	oneration	of business

debtor's business during joint petition is filed, stat	State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)							
AMOUNT	SOURCE							
\$987.00	2013/Pensions & Annuities							
Complete a or b, as app a. Individual or joint det goods or services, and ot this case if the aggregate Indicate with an asterisk as part of an alternative r	3. Payments to creditors  Complete a or b, as appropriate, and c. a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600.  Indicate with an asterisk(*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses							
NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING					
NAME AND ADDRESS OF CREDITOR	and a joint petition is not filed.)  DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING					
c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  NAME AND ADDRESS OF DATE OF AMOUNT AMOUNT CREDITOR AND PAYMENT PAID STILL OWING								
RELATIONSHIP TO DEBTOR								
4. Suits and administra	tive proceedings, executions, garnish	ments and attachments						
preceding the filing of th	nistrative proceedings to which the debis bankruptcy case. (Married debtors fitther or both spouses whether or not a j filed.)	ling under chapter 12 or chap	ter 13 must include					
CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION					

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B7 (Official Form 7) (04/13)

None X b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

 NAME AND ADDRESS
 DESCRIPTION

 OF PERSON FOR WHOSE
 DATE OF
 AND VALUE

 BENEFIT PROPERTY WAS
 SEIZURE
 OF PROPERTY

SEIZED

#### 5. Repossessions, foreclosures and returns

None X List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATE OF REPOSSESSION, DESCRIPTION
OF CREDITOR OR SELLER FORECLOSURE SALE, AND VALUE
TRANSFER OR RETURN OF PROPERTY

#### 6. Assignments and receiverships

None X

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATE OF TERMS OF
OF ASSIGNEE ASSIGNMENT ASSIGNMENT
OR SETTLEMENT

None

X

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS NAME AND LOCATION DATE OF DESCRIPTION
OF CUSTODIAN OF COURT ORDER AND VALUE
CASE TITLE & NUMBER OF PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESSRELATIONSHIPDATEDESCRIPTIONOF PERSONTO DEBTOR,OF GIFTAND VALUEOR ORGANIZATIONIF ANYOF GIFT

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#### 8. Losses

None X List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the comencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES DATE
AND, IF LOSS WAS COVERED OF LOSS
IN WHOLE OR IN PART BY

INSURANCE -- GIVE PARTICULARS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or properly transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Richard L. Banks (see disclosure)
StandSure Counseling \$45.00

#### 10. Other transfers

None X a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS

OF TRANSFEREE,

TRANSFERED AND
RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY

TRANSFERED AND
VALUE RECEIVED

None X b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

### 11. Closed financial accounts

None X List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL

AMOUNT AND DATE OF SALE OR CLOSING

BALANCE

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#### 12. Safe deposit boxes

Γ	vone	)
	X	

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS NAMES AND ADDRESSES DESCRIPTION DATE OF TRANSFER
OF BANK OR OF THOSE WITH ACCESS OF OR SURRENDER,
OTHER DEPOSITORY TO BOX OR DEPOSITORY CONTENTS IF ANY

#### 13. Setoffs

None X List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF DATE OF AMOUNT CREDITOR SETOFF OF SETOFF

### 14. Property held for another person

None X List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS DESCRIPTION AND OF OWNER VALUE OF PROPERTY

### 15. Prior address of debtor

None

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

LOCATION OF PROPERTY

ADDRESS NAME USED DATES OF OCCUPANCY

### 16. Spouses and Former Spouses

None X If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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#### 17. Environmental Information.

None

For the purpose of this question, the following definitions apply:

X

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None X b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

None X c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS DOCKET NUMBER STATUS OR OF GOVERNMENTAL UNIT DISPOSITION

### 18. Nature, location and name of business

None X a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity recurities within six years immediately preceding

which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a parnter or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME LAST FOUR DIGITS ADDRESS NATURE OF BUSINESS BEGINNING AND OF SOC. SEC. NO./ ENDING DATES

OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.

Statement of Financial Affairs, Page 6 (Continued)

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b. Identify any business listed in response to subdivision a, above, that is "single asset real estate" as

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None

X	defined in 11 U.S.C. § 101	l.		
	NAME	ADDRESS		
debtor whofficer, departner, continuer, cont	no is or has been, within the si irector, managing executive, co other than a limited partner, of 1- or part-time.	x years immediately preceding the con or owner of more than 5 percent of the a partnership, a sole proprietor, or self	pration or partnership and by any individual amencement of this case, any of the following: an voting or equity securities of a corporation; a temployed in a trade, profession, or other activity, at only if the debtor is or has been in business, as	
		nediately preceding the commencement go directly to the signature page.)	of this case. A debtor who has not been in	
	19. Books, records and f	inancial statements		
None	•	d accountants who within two years impervised the keeping of books of account		
	NAME AND ADDRESS	DATES SERVICES RENDERED		
None X		uals who within two years immediately as of account and records, or prepared and ADDRESS	preceding the filing of this bankruptcy in financial statement of the debtor.  DATES SERVICES RENDERED	
None X			nent of this case were in possession of the f account and records are not available, explain.	
	NAME	ADDRESS		
None X		=	ding mercantile and trade agencies, to whom a mediately preceding the commencement of this case.	
	20. Inventories			
None		t two inventories taken of your propert and the dollar amount and basis of each	y, the name of the person who supervised the inventory.	
	DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)	

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None X b. List the name and address of the person having possession of the records of each of the two inventories reported

in a., above.

DATE OF INVENTORY

NAME AND ADDRESS OF CUSTODIAN OF INVENTORY RECORDS

### 21. Current Partners, Officers, Directors and Shareholders

None X a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

### 22. Former partners, officers, directors and shareholders

None X a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None X b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None X If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY
OR DESCRIPTION
AND VALUE OF PROPERTY

RELATIONSHIP TO DEBTOR

### 24. Tax Consolidation Group

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year periond immediately preceding the commencement of the case.

NAME OF PARENT

TAXPAYER IDENTIFICATION

CORPORATION

NUMBER (EIN)

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### 25. Pension Funds

None X If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION TAXPAYER IDENTIFICATION

FUND NUMBER (EIN)

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\* \* \* \* \* \*

(If completed by an individual or individual and spouse) I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct. Date August 22, 2014 Signature /s/ Wallace Ray Walker of Debtor Date August 22, 2014 Signature /s/ Glenda Kaye Walker of Joint Debtor (if any) (If completed on behalf of a partnership or corporation) I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief. Signature Print Name and Title [An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.] continuation sheets attached Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. 152 and 3571

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I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for

B7 (Official Form 7) (04/13)

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

compensation and have provided the debtor with a copy of this document and the notion and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C bankruptcy petition preparers, I have given the debtor notice of the maximum amount any fee from the debtor, as required by that section.	C. § 110(h) setting a maximum fee for services chargeable by
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), a responsible person ,or partner who signs this document.	ddress, and social security number of the officer, principal,
Address	
X	
Signature of Bankruptcy Petition Preparer	Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or Imprisonment or both. 18 U.S.C. § 156.

Anesthesia Consultants Exchange P.O. Box 371863 Pittsburgh, PA 15250-7863

Belk P.O. Box 530940 Atlanta, GA 30353-0940

Blue Ridge Pulmonary 110 Dunhill Place Cleveland, TN 37311

Bradley Memorial Credit Union P.O. Box 3060 Cleveland, TN 37320-3060

Capital One PO Box 71083 Charlotte, NC 28272-1083

Capital One Retail Services Dept. 7680 Carol Stream, IL

Cardmember Services
P.O. Box 94014
Palatine, IL 60094-4014

Care Credit P.O. Box 960061 Orlando, FL 32896-0061

Chase P.O. Box 94014 Palatine, IL 60094

Cleveland Medical Clinic P.O. Box 848418 Boston, MA 02284-8418

Dell Preferred Account PO Box 6403 Carol Stream, IL 60197-6403 Discover
P.O. Box 6103
Carol Stream, IL 30197-6103

East TN Neurology P.O. Box 3861 Cleveland, TN 37320

JC Penney P.O. Box 960090 Orlando, FL 32890

Kohls P.O. Box 2983 Milwaukee, WI 53201-2983

Lowes
PO Box 530914
Atlanta, GA 30353-0914

Memorial Health Care System P.O. Box 644492 Pittsburgh, PA 15264-4492

MSCB P.O. Box 1567 Paris, TN 38242-1567

PASI PO Box 188 Brentwood, TN 37024-0188

RMB 409 Bearden Park Circle Knoxville, TN 37919

SkyRidge Medical Center PO Box 198029 Atlanta, GA 30384-8029

Southeastern Physician Service 3225 North Star Cir. Louisville, TN 37777

Southeastern Physician Service P.O. Box 630707 Cincinnati, OH 45263-0707

Target
P.O. Box 660170
Dallas, TX 75266-0170

Tennessee Valley Urology 400 Berywood Trial NW Suite B Cleveland, TN 37312

Vista Radiology PC Dept. 888302 Knoxville, TN 37995-8302

Volkswagen Credit PO Box 5215 Carol Stream, IL 60132

Wells Fargo Financial P.O. Box 10475
Des Monies, IA 50306

# Case 1:14-bk-13698 Doc 1 Filed 08/22/14 Entered 08/22/14 13:33:19 Desc Main Document Page 48 of 56 UNITED STATES BANKRUPTCY COURT

### Eastern District of Tennessee Southern Division

IN RE: Wallace Ray Walker Case No.

and: Glenda Kaye Walker Judge Cook/Rucker

Chapter 13

### VERIFICATION OF CREDITOR MATRIX

The above-named Debtor(s) hereby verifies under the penalty of perjury under the laws of the United States of America that the attached list of creditors is true and correct to the best of my (our) knowledge.

Date: August 22, 2014 Signature /s/ Wallace Ray Walker

Wallace Ray Walker, Debtor

Date: August 22, 2014 Signature /s/ Glenda Kaye Walker

Glenda Kaye Walker, Joint Debtor

Date: August 22, 2014 /s/ Richard L. Banks, #000617

Richard L. Banks, #000617 Attorney for Debtor

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B22C (	Official Form 22C) (Chapter 13) (04/13)	
In re	Wallace Ray Walker	According to the calculations required by this statement:  The applicable commitment period is 3 years.
	Glenda Kaye Walker	☐ The applicable commitment period is 5 years.
Case 1	Debtor(s) Number:	☐ Disposable income is determined under § 1325(b)(3)
	(If known)	Disposable income is not determined under § 1325(b)(3) (Check the boxes as directed in Lines 17 and 23 of this statement.)

# CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

		Pa	rt I. REPORT O	F INCC	OME			
	Marita	al/filing status. Check the box that applies and	complete the balance of	f this part of	of this statement	as direc	ted.	
1	a. 🗌	Unmarried. Complete only Column A ("Del	otor's Income") for Lin	es 2-10.				
		Married. Complete both Column A ("Debte				") for Li	nes 2-10.	
	six cal before	ures must reflect average monthly income rece endar months prior to filing the bankruptcy cas the filing. If the amount of monthly income ver the six-month total by six, and enter the result	e, ending on the last day aried during the six mon	of the mo	nth		Column A Debtor's Income	Column B Spouse's Income
2	Gross	wages, salary, tips, bonuses, overtime, comm	issions.				\$ 0.00	\$ 4,963.04
3	and en than ze	e from the operation of a business, profession ter the difference in the appropriate column(s) ero. Do not include any part of the business of the in Part IV.	of Line 3. Do not enter	a number l		se		
	a.	Gross receipts	\$	0.00	\$ 0	.00		
	b.	Ordinary and necessary business expenses	\$	0.00	\$ 0	.00		
	c.	Business income	Subtract Line b	from Line	a		\$ 0.00	\$ 0.00
	the app	and other real property income. Subtract Lin propriate column(s) of Line 4. Do not enter a rart of the operating expenses entered on Line	umber less than zero. Γ	o not in- c rt IV.		se		
4	a.	Gross receipts	\$	0.00	\$ 0	.00		
	b.	Ordinary and necessary operating expenses	\$	0.00	\$ 0	.00		
	c.	Rental income	Subtract Line b	from Line	a		\$ 0.00	\$ 0.00
5	Intere	st, dividends and royalties.					\$ 0.00	\$ 0.00
6	Pensio	n and retirement income.					\$ 0.00	\$ 0.00
7	expens purpo debtor	mounts paid by another person or entity, on see of the debtor or the debtor's dependents, see. Do not include alimony or separate mainte is spouse. Each regular payment should be report that payment in Co	including child support nance payments or amounted in only one column	t paid for ints paid by	that y the		\$ 0.00	\$ 0.00
8	Unem Howev	ployment compensation. Enter the amount in ver, if you contend that unemployment compensation and the Social Security Act, do not list in A or B, but instead state the amount in the sp	the appropriate columnsation received by you out the amount of such co	r your spo	use		1	
		ployment compensation claimed to benefit under the Social Security Act	<b>Debtor</b> \$ 0.00	Spouse	\$ 0.00		\$ 0.00	\$ 0.00

9	Income from all other sources. Specify source and amount. If necessary, li on a separate page. Total and enter on Line 9. Do not include alimony or se maintenance payments paid by your spouse, but include all other payme separate maintenance. Do not include any benefits received under the Soci payments received as a victim of a war crime, crime against humanity, or as international or domestic terrorism.	parate ints of alimony or al Security Act or		
	a. b.	\$ 0.00	\$ 0.00	\$ 0.00
10	<b>Subtotal.</b> Add Lines 2 thru 9 in Column A, and, if Column B is completed, through 9 in Column B. Enter the total(s).	add Lines 2	\$ 0.00	\$ 4,963.04
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10 enter the total. If Column B has not been completed, enter the amount from A.	Line 10, Column	\$ 4,963.04	
	Part II. CALCULATION OF § 1325(b)	(4) COMMITMENT PE	RIOD	Γ
12	Enter the amount from Line 11.			\$ 4,963.04
13	Marital adjustment. If you are married, but are not filing jointly with your calculation of the commitment period under § 1325(b)(4) does not require in spouse, enter on Line 13 the amount of the income listed in Line 10, Column basis for the household expenses of you or your dependents and specify, in t excluding this income (such as payment of the spouse's tax liability or the spouse's tax liability or the spouse's dependents) and the amount of income devote additional adjustments on a separate page. If the conditions for entering this	clusion of the income of your n B that was NOT paid on a regula he lines below, the basis for youse's support of persons other ed to each purpose. If necessary, list	st	
	a.	\$ 0.	-	
	b. c.	\$ 0.0 \$ 0.0	_	
	Total and enter on Line 13.	ŷ U.	50	\$ 0.00
14	Subtract Line 13 from Line 12 and enter the result.			\$ 4,963.04
15	Annualized Current Monthly Income for § 1325(b)(4). Multiply the amount and enter the result.	ant from Line 14 by the number 12		\$ 59,556.48
16	<b>Applicable median family income.</b> Enter the median family income for the (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from court.)		ee.	
	a. Enter debtor's state of residence: TN b. Enter debtor	or's household size:	2	\$48,757.00
	Application of § 1325(b)(4). Check the applicable box and proceed as direct	ted.		
	The amount on Line 15 is less than the amount on Line 16. Check the 3 years" at the top of page 1 of this statement and continue with this statement.		ment period is	
17	The amount on Line 15 is not less than the amount on Line 16. Chec is 5 years" at the top of page 1 of this statement and continue with this s		mitment period	
	Part III. APPLICATION OF § 1325(b)(3) FOR D	ETERMINING DISPOSABI	LE INCOME	
18	Enter the amount from Line 11.			\$ 4,963.04

3

B22C (Official Form 22C) (Chapter 13) (04/13)

19	any inco debtor o (such as debtor's	ome listed in Line 10, Column B that were the debtor's dependents. Specify in the debtor's dependents are specified in the debtor's dependents.	vas NOT paid of the lines below to the spouse's and devoted to ear	n a regu the basi support ch purp		00 00	
	Total	and enter on Line 19.			•		0.00
20	Curren	t monthly income for § 1325(b)(3).	Subtract Line 1	9 from	Line 18 and enter the result.		\$ 4,963.04
21		iized Current Monthly Income for § ter the result.	<b>1325(b)(3).</b> M	ultiply	the amount from Line 20 by the number 1	2	\$ 59,556.48
22	Applica	able median family income. Enter th	e amount from	Line 16			\$48,757.00
23	Application of § 1325(b)(3). Check the applicable box and proceed as directed.  The amount on Line 21 is more than the amount on Line 22 Check the box for "Disposable income is determined under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement.  The amount on Line 21 is not more than the amount on Line 22 Check the box for "Disposable income is not determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not						
		omplete Parts IV, V, or VI.  Part IV. C	ALCULATION	ON OF	DEDUCTIONS FROM INCOME		
		Subpart A: Dedu	ctions under S	Standa	ards of the Internal Revenue Service	e (IRS)	
24A	Expens the cler allowed	es for the applicable number of person k of the bankruptcy court.) The applic l as exemptions on your federal incom	" amount from las. (This informable number of	IRS Nat nation is persons	tional Standards for Allowable Living savailable at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from s is the number that would currently be		\$1,092.00
24B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out- of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out- of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons						
	Perso	ns under 65 years of age		Perso	ons 65 years of age or older		
	a1.	Allowance per person	\$60.00	a2.	Allowance per person	\$144.00	
	b1.	Number of persons	2	b2.	Number of persons	0	\$120.00
	c1.	Subtotal	\$120.00	c2.	Subtotal	\$0.00	
25A	the number that would currently be allowed as exemptions on your federal income tax return, plus the number of				\$494.00		

Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and 25B \$841.00 IRS Housing and Utilities Standards; mortgage/rent Expense Average Monthly Payment for any debts secured by your b. \$853.96 home, if any, as stated in Line 47 \$0.00 Subtract Line b from Line a. c. Net mortgage/rental expense Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and 26 Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: \$ 0.00 Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. 27A Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7.  $\square 0 \qquad \square 1 \qquad X \qquad 2 \text{ or more.}$ If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy \$488.00 court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an 27B additional deduction for your public transportation expenses, enter on Line 27B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from \$0.00 the clerk of the bankruptcy court.) Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) ☐ 1 **X** 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. 28 IRS Transportation Standards, Ownership Costs, First Car a \$517.00 Average Monthly Payment for any debts secured by Vehicle 1, \$ 150.65 as stated in Line 47 Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. \$366.35

1

322C	C (Official Form 22C) (Chapter 13) (04/13)	5
20	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Linchecked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line be Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line a and enter the result in Line 29. Do not enter an amount less than zero.	Transportation he total of the
29	a. IRS Transportation Standards, Ownership Costs, Second Car	\$517.00
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47	\$ 382.90
	c. Net ownership/lease expense for Vehicle 2 Subtract	Line b from Line a. \$134.10
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actual federal, state and local taxes, other than real estate and sales taxes, such as income taxes, sell taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	
31	Other Necessary Expenses: involuntary deductions for employment. Enter the total averadeductions that are required for your employment, such as mandatory retirement contribution uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	ns, union dues, and
32	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you term life insurance for yourself. Do not include premiums for insurance on your depende or for any other form of insurance.	
33	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that to pay pursuant to the order of a court or administrative agency, such as spousal or child sup not include payments on past due obligations included in Line 49.	* *
34	Other Necessary Expenses: education for employment or for a physically or mentally clear the total average monthly amount that you actually expend for education that is a condemployment and for education that is required for a physically or mentally challenged dependent whom no public education providing similar services is available.	ition of
35	Other Necessary Expenses: childcare. Enter the total average monthly amount that you act childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educ	
36	Other Necessary Expenses: health care. Enter the total average monthly amount that you health care that is required for the health and welfare of yourself or your dependents, that is insurance or paid by a health savings account, and that is in excess of the amount entered in include payments for health insurance or health savings accounts listed in Line 39.	not reimbursed by
37	Other Necessary Expenses: telecommunication services. Enter the total average monthly actually pay for telecommunication services other than your basic home telephone and cell pas pagers, call waiting, caller id, special long distance, or internet service—to the extent necessitation health and welfare or that of your dependents. Do not include any amount previously deduced to the extent necessitation of the extent necessitation and the extent necessitation is a service of the extent necessitation and the extent necessitation and the extent necessitation and the extent necessitation are represented in the extent necessitation and the extent necess	hone service— such
38	Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 3	7 \$3,730.97

Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 24 - 37

B22C (Official Form 22C) (Chapter 13) (04/13) Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your Health Insurance a. \$ 162.50 39 \$41.99 Disability Insurance Health Savings Account \$ 0.00 c. Total and enter on Line 39 \$ 204.49 If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ 0.00 Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, 40 chronically ill, or disabled member of your household or member of your immediate family who is unable to \$ 0.00 pay for such expenses. Do not include payments listed in Line 34. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you 41 actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or \$ 0.00 other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional \$ 0.00 amount claimed is reasonable and necessary. Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary 43 school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and \$ 0.00 necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National 44 Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is \$38.00 reasonable and necessary. Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable 45 contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § \$ 0.00 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. 46 Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45 \$ 242.49 **Subpart C: Deductions for Debt Payment** Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47. 47 Property Securing the Debt Average Does payment Name of Creditor Monthly include taxes Payment or insurance? Wells Fargo Financial House & Lot x yes no \$ 853.96 b. Volkswagen Credit Volkswagen Tiguan ☐ yes X no \$ 382.90 c. Bradley Memorial Hospital CU 2002 Jeep Wrangler X no □ yes \$ 150.65 Total: Add

Lines a, b and c

\$1,387.51

DZZC	Official	1 Form 22C) (Chapter 13) (04/	13)		/
	motor includ to the includ	vehicle, or other property nece e in your deduction 1/60th of a payments listed in Line 47, in e any sums in default that mus	If any of debts listed in Line 47 are secure essary for your support or the support of you my amount (the "cure amount") that you mu order to maintain possession of the property to be paid in order to avoid repossession or for If necessary, list additional entries on a sep	or dependents, you may st pay the creditor in addition The cure amount would preclosure. List and total any	
48		Name of Creditor	Property Securing the Debt	1/60th of the Cure Amount	
	a.			\$ 0.00	
	b.			\$ 0.00	
	c.			\$ 0.00	
				Total: Add Lines a, b and c	\$0.00
49	priorit Do no	y tax, child support and alimor t include current obligations, s	laims. Enter the total amount, divided by 60 by claims, for which you were liable at the tuch as those set out in Line 33.  s. Multiply the amount in Line a by the amount in Line as the set of the s	ime of your bankruptcy filing.	\$ 0.00
		ng administrative expense.	s. Multiply the amount in Line a by the ank	nun in Eine o, and einer uie	
	a.	Projected average monthly	Chapter 13 plan payment.	2,159.00	
50	b.	1	cutive Office for United States is available at www.usdoj.gov/ust/	X 3.50 %	
	c.	Average monthly administra	ntive expense of Chapter 13 case	Total: Multiply Lines a and b	\$ 75.57
51	Total	Deductions for Debt Pa	syment. Enter the total of Lines 47	through 50.	\$ 1,463.08
		Subpa	ert D: Total Deductions Allow	wed under § 707(b)(2)	
52	Tota	l of all deductions allow	ed under § 707(b)(2). Enter the tot	al of Lines 38, 46, and 51.	\$5,436.54
		Part V. DETER	RMINATION OF DISPOSABL	E INCOME UNDER § 1325(b)(2)	_
53	Total	current monthly income. En	ter the amount from Line 20.		4,963.04
54	disabil	ity payments for a dependent of	average of any child support payments, fost child, reported in Part I, that you received in conably necessary to be expended for such c	accordance with applicable	\$ 0.00
55	wages	as contributions for qualified	nter the monthly total of (a) all amounts wit retirement plans, as specified in § 541(b)(7) plans, as specified in § 362(b)(19).		\$ 0.00

\$5,436.54

Total of all deductions allowed under § 707(b)(2)). Enter the amount from Line 52.

August 22, 2014

Date:

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	which a-c be Line	ction for special circumstances. If there are special circumstances that justify there is no reasonable alternative, describe the special circumstances and the low. If necessary, list additional entries on a separate page. Total the expenses 7. You must provide your case trustee with documentation of these expende a detailed explanation of the special circumstances that make such expensionable.	resulting expenses in lines s and enter the total in ses and you must		
57		Nature of special circumstances	Amount of expense		
	a.		\$ 0.00		
	b.		\$ 0.00		
	c.		\$ 0.00		
			Total: Add Lines a, b and c		\$ 0.00
58	Total the re	adjustments to determine disposable income. Add the amounts on Lines 5 sult.	54, 55, 56 and 57 and enter		\$5,436.54
59	Mont	nly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53	and enter the result.		(\$473.50)
		Part VII: ADDITIONAL EXPE	NSE CLAIMS		
	and w	Expenses. List and describe any monthly expenses, not otherwise stated in the elfare of you and your family and that you contend should be an additional described and the content of the		th	
		the under $\S 707(b)(2)(A)(ii)(1)$ . If necessary, list additional sources on a separate monthly expense for each item. Total the expenses.		ır	
60		* *************************************			
60		ge monthly expense for each item. Total the expenses.	ate page. All figures should reflect you		
60	a. b.	ge monthly expense for each item. Total the expenses.	ate page. All figures should reflect you	\$ 0.00 \$ 0.00	
60	avera a.	Expense Description	Monthly An	\$ 0.00 \$ 0.00 \$ 0.00	
60	a. b.	ge monthly expense for each item. Total the expenses.	Monthly An	\$ 0.00 \$ 0.00	
60	a. b. c.	Expense Description  Total: Add Lines a, b and a second se	Monthly An  Monthly An Monthly Andrew Andre	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	

/s/ Glenda Kaye Walker

(Joint Debtor, if any)

Signature: